ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.U.		10/28/00
O.I.P.E. CLASSIFIER		8	11-600
FORMALITY REVIEW	yz	90t	12/20/00
RESPONSE FORMALITY REVIEW	MT	523	04/19/01

INDEX OF CLAIMS

✔ .... Rejected   N .... Non-elected
= .... Allowed   I .... Interference
— (Through numeral)... Canceled   A .... Appeal
÷ .... Restricted   O .... Objected

Claim		Date						
Final	Original	3/29/02	10/29/02	5/29/03				
	1	✔	✔	✔				
	2	O		✔				
	3	O		✔				
	4	O						
	5	O						
	6	O						
	7	O						
	8	O						
	9	✔		✔				
	10	✔	✔	✔				
	11	✔	✔	✔				
	12	✔	✔	✔				
	13	✔	✔	✔				
	14		✔					
	15		✔					
	16							

(Claims 17-50, 51-100, 101-150 blank)

If more than 150 claims or 10 actions
staple additional sh et her

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